

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

MFCEP.88143

## CLAIMS AS FILED - PART I

|   | (Column 1)    | (Column 2)   |
|---|---------------|--------------|
| TOTAL CLAIMS  | 16            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 16 minus 20 = | 4            |
| INDEPENDENT CLAIMS  | 4 minus 3 =   | 1            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 16                               | 20                                 | 4             |
| Independent   | 4                                | 4                                  | 1             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

## SMALL ENTITY TYPE ☐

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 370.00 |
| X\$ 9=    |        |
| X42=      |        |
| +140=     |        |
| TOTAL     |        |

## OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 740.00 |
| X\$18=    |        |
| X84=      | 80     |
| +280=     |        |
| TOTAL     | 824    |

## SMALL ENTITY OR

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

## OR OTHER THAN SMALL ENTITY

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$ 9=     |                |
| X42=       |                |
| +140=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

| RATE       | ADDITIONAL FEE |
|------------|----------------|
| X\$18=     |                |
| X84=       |                |
| +280=      |                |
| TOTAL      |                |
| ADDIT. FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 16                               | 20                                 | 4             |
| Independent   | 4                                | 4                                  | 1             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   |                                  |                                    |               |
| Independent   |                                  |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" is less than 3, enter "3."  
 The "Highest Number Previously Paid For" is the highest number found in the appropriate box in column 1.

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" is less than 3, enter "3."  
 The "Highest Number Previously Paid For" is the highest number found in the appropriate box in column 1.

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